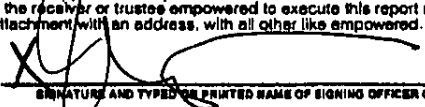


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 21, 2006 08:00 A
Secretary of State

DOCUMENT # P99000025618 1. Entity Name LUXE CABLE & LIGHT, INC.			
Principal Place of Business 1 NE 40TH STREET STE 1 MIAMI, FL 33137		Mailing Address 901 NE 125TH ST #101 N. MIAMI, FL 33161	
DO NOT WRITE IN THIS SPACE			
01052006 No Chg-P CR2E034 (11/05)			
4. FEI Number 65-0905164			Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐			\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent JOSEPH PATERNOSTRO ACCOUNTING SER., INC 901 N.W. 125TH STREET, STE. 10 N. MIAMI, FL 33161		DO NOT WRITE IN THIS SPACE	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ DATE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)			
FILE NOW!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		U000000574970 08/22/06-80005-015 400.00 U000000574970 08/22/06-80005-016 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BEHRMAN, JILL 930 BEKKE NEADE BLVD MIAMI, FL 33138		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11.			
SIGNATURE: 		7/6/06	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Daytime Phone #	